

Date: December 31, 2013 **MEPD Policy Bulletin Number: 14-02 Final**

To: Eligibility Services – Regional
Directors
Program Managers
Eligibility Services Supervisors
Regional Attorneys
Hearings Officers

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Subject: **1. Clarification: Electronic Verifications**
2. Social Security Number (SSN) Verification
3. Citizenship and Identity Verification
4. Reasonable Opportunity Verification
5. Authorized Representative

This bulletin is being sent to supervisors and other regional managers. Supervisors must share this information with all Medicaid for the Elderly and People with Disabilities (MEPD) staff. Please ensure copies are provided to staff that do not have access to email. If you have any questions regarding the policy information in this bulletin, follow regional procedures. The information in this bulletin is available at the following websites:

- Eligibility Services - <http://ofs.hhsc.state.tx.us/mepd/mepd-bulletins.aspx>, and
- MEPD Handbook - http://www.dads.state.tx.us/handbooks/mepd_policy/index.htm.

Background

There are new federally-required eligibility changes to Medicaid included in the Patient Protection and Affordable Care Act (Public Law 111-148) and the Health Care and Education Reconciliation Act of 2010 (Public Law 111-152), commonly referred to together as the Affordable Care Act (ACA). In general, ACA requires states to base household income and composition on federal income tax rules; make eligibility determinations for most medical programs based on modified adjusted gross income (MAGI) rules; eliminate assets tests and current deductions for expenses when making eligibility determinations; and to use a single streamlined application for all insurance affordability programs including new federal programs such as, advance payments of the premium tax credit (APTCs) and cost-sharing reductions (CSRs), and state Medicaid and CHIP programs. Most of the new requirements have little impact for MEPD staff. This bulletin covers the ACA requirements that will impact MEPD staff.

1. Electronic Verifications

Current Policy

Many times, staff attempt to use verification sources found through Data Broker to complete case processing. In addition, some pieces of financial and background information available through Data Broker are treated as case clues and additional verification is requested from the individual.

New Policy

Under the ACA, staff must attempt to verify eligibility criteria using information from electronic sources. Staff may not request additional information or documentation from individuals unless such information is not available electronically or the information obtained electronically is not consistent with the information on the application.

Staff cannot ask an individual to provide additional proof if:

- Verification is available through the Texas Workforce Commission inquiry, the Birth Verification System (BVS), the wage reporting source known as "TALX," child support inquiry, or other automated systems that are acceptable verification sources, and accessible to staff, or if the individual indicates that verification is readily available in the electronic case record.
- The information is sufficient to establish eligibility and calculate an accurate copayment/applied income amount.

2. SSN Verification

Current Policy

As a condition of eligibility, an individual must furnish an SSN. If the individual cannot provide an SSN, verification that the individual has applied for an SSN is required. SSNs provided by applicants or recipients are validated through a Social Security Administration (SSA) interface in TIERS.

New Policy

Staff must verify an individual's SSN at application for all Medicaid applicants, using the State Online Query (SOLQ) system.

If the individual has an SSN, use SSA records to verify the individual's SSN through SOLQ. If the SOLQ response indicates that the SSN is verified, no additional verification is required, and staff should select "Verified by SSA (SOLQ, WTPY, and HUB)" in the SSN verification dropdown menu.

If staff is unable to verify the SSN using SOLQ:

- Review the information entered into the SOLQ request with the information provided by the applicant. If a typographical error is found, submit a new SOLQ request with the correct information.
- If no typographical errors are found, contact the applicant by phone to ensure the information provided is accurate. If the applicant provides new information, submit another SOLQ request with the correct information. Note: Update the EDG record with the correct information.
- If the individual fails to cooperate in clearing the discrepancy with SSA, follow procedures in B-6510, **Failure to Furnish Missing Information**.
- If the individual is unwilling to provide the correct SSN via phone or if the individual cannot be contacted by phone, request verification of the SSN along with any additional information needed. Allow the individual ten days to provide proof.

Automation

Automation changes will be implemented with Release 89 scheduled for December 2013.

Edit Existing Individual ID Information

Case Name: Test,Test Case #: 1111111111 Case Mode: Change Case Status: Approved

Reset Cancel Add Previous Next

Self Service Application Information

Date Submitted	First Name	Middle Name	Last Name	SSN	Gender	Source
01/01/2014 02:01:59 PM	Test1	T	Test2	888-99-8888	Female	Client statement

Self Service Change Request Information

Date Submitted	First Name	Middle Name	Last Name	SSN	Gender	Source
01/01/2014 03:23:48 PM	Test2	T	Test2	999-99-9999	Female	Client statement

Self Service Redetermination Information

Date Submitted	First Name	Middle Name	Last Name	SSN	Gender	Source
06/01/2014 11:09:16 AM	Test3	T	Test2	111-11-1111	Female	Client statement

Individual Name

Prefix: First: Middle: Last: Estorga Suffix:

Demographic Information

Gender: Unknown Date of Birth: Verification(s):

SSN: SSN Verification: Validated by SSA

Ethnicity: Client statement
Not provided
Conversion
Verified by SSA (SOLD, WTPY, HUB)
Could not be verified by SSA
Sign Language

CHIP Client Id: Maiden Name:

If deceased, date of death: Deceased Verification:

Mother's Maiden Name:

3. Citizenship and Identity Verification

Current Policy

Persons applying for or receiving Medicaid who declare themselves to be U.S. citizens or U.S. nationals must provide evidence of citizenship. Verification must establish both citizenship and identity. Verification sources used to establish citizenship and identity are divided into four levels: primary, second, third, and fourth. Primary sources can be used to establish both citizenship and identity. Sources that establish only citizenship are divided into second, third, and fourth levels based on the reliability of the source. The eligibility specialist must indicate that the source used for verification of citizenship is the most reliable source available. If using a source from the second, third, or fourth level, the individual must also provide two documents, one to establish U.S. citizenship and a different verification document to establish identity.

Active or denied SSI recipients, individuals determined entitled to or enrolled in Medicare (including individuals in the 24 month waiting period for Medicare), and individuals receiving Social Security benefits based on their own disability are not required to provide evidence of identity and citizenship when they claim to be U.S. citizens or U.S. nationals.

New Policy

If the individual is not exempt from verification of citizenship, as indicated above, and has an SSN, use SSA records to verify citizenship through WTPY. Follow the steps in the chart below to determine the required staff action for each response code.

If the WTPY response code is...	then...
A SSN is verified, there is no indication of death, and the allegation of citizenship is consistent with SSA data	1. Select "Verified by SSA (SOLQ, WTPY, and HUB)" in the SSN verification dropdown menu 2. Select "Verified by SSA (SOLQ, WTPY, and HUB)" in the citizenship verification dropdown menu
B SSN is verified, there is no indication of death, and the allegation of citizenship is NOT consistent with SSA data	1. Select "Verified by SSA (SOLQ, WTPY, and HUB)" in the SSN verification dropdown menu 2. See process " If unable to verify citizenship (Code B) " below
C SSN is verified, there is indication of death, and the allegation of citizenship is consistent with SSA data	1. Select "Verified by SSA (SOLQ, WTPY, and HUB)" in the SSN verification dropdown menu 2. Treat the death information as a change using current policy
D SSN is verified, there is indication of death, and the allegation of citizenship is NOT consistent with SSA data	1. Select "Verified by SSA (SOLQ, WTPY, and HUB)" in the SSN verification dropdown menu 2. Treat the death information as a change

using current policy

If unable to verify citizenship (Code B)...

Staff should attempt to verify citizenship using BVS.

1. If unable to verify citizenship using BVS and additional information is required to determine eligibility, request the additional information and verification of citizenship, and allow the individual 10 days to provide proof.
 - If the client does not return the additional information within 10 days, deny the case for failure to provide required information.
 - If the client provides the additional information, but does not provide verification of citizenship, allow the individual a period of reasonable opportunity to provide the verification of citizenship.
2. If unable to verify citizenship using BVS and no other information is required to determine eligibility, allow the individual a period of reasonable opportunity to provide the verification.

After allowing reasonable opportunity if the recipient refuses or fails to provide proof, disqualify the individual until proof of citizenship is provided. See further information on changes to reasonable opportunity periods in later subject matter contained within this bulletin entitled [4. Reasonable Opportunity Verification](#).

If the WTPY system is unresponsive or unavailable due to system failure, staff must not deny or delay certification of Medicaid coverage for failure to verify SSN or citizenship. If the WTPY system is unresponsive or presents an error message staff must:

- Enter the SSN as provided by the applicant into TIERS and allow the automated SSA interface to validate the SSN.
- Allow the individual a period of reasonable opportunity to provide the verification of citizenship. See further information on changes to reasonable opportunity periods provided in the final subject of this bulletin, [4. Reasonable Opportunity Verification](#).

Verification sources are now divided into two levels: Level 1 and Level 2. Level 1 sources establish both citizenship and identity. Level 2 sources only establish citizenship. If using a Level 2 source, the individual must also provide an additional Medicaid identity verification source. Do not use the same source to verify identity that was used to verify citizenship.

The following chart compares previously acceptable sources of documentation and the corresponding level of verification with new policy on verification sources and the level of verification.

Current Policy

New Policy

Primary Level	SOLQ/ WTPY	Same	Level 1
	U.S. passport	Same	
	Certificate of Naturalization (DHS Forms N-550 or N-570)	Same	
	Certificate of U.S. citizenship (DHS Forms N-560 or N-561)	Same	
	SDX for denied SSI recipients when the denial reason is for any reason other than citizenship	Same	
	Evidence of membership or enrollment in a federally recognized tribe	Same	
	SOLQ/ WTPY and documentation on reason for Medicare denial	Same	
	Inquiry reflecting a current or denied TP 45 Medicaid EDG	Same	
Second Level	CHIP-P inquiry reflecting a current or denied CHIP-P case for the child	Same	Level 2
	A U.S. public birth certificate showing birth in one of the 50 states, the District of Columbia, Puerto Rico (if born on or after Jan. 13, 1941), Guam (on or after April 10, 1899), the Virgin Islands of the U.S. (on or after Jan. 17, 1917), American Samoa, Swain's Island or the Northern Mariana Islands (after Nov. 4, 1986)*	Same	
	Vital Statistics Unit certificate	BVS Inquiry	
	Report of Birth Abroad of a U.S. Citizen (FS-240)	Same	
	Certification of Birth Abroad (FS 545 or DS-1350)	Same	
	U.S. Citizen identification card (Form I-179 or I-197)	Same	
	Northern Mariana identification card (I-873)	Same	
	Final adoption decree showing the child's name and U.S. place of birth	Same	
	Evidence of U.S. Civil Service employment before June 1, 1976	Same	

	U.S. military record showing a U.S. place of birth (Example: DD-214)	Same	Level 2
	SAVE for naturalized citizens	Same	
	Evidence of meeting the automatic criteria for U.S. citizenship outlined in the Child Citizenship Act of 2000, if a child has not yet received Certificate of Citizenship, N-560 or N-561 which includes: proof that at least one parent of the child is a U.S. citizen, by birth or naturalization; proof that the child is under age 18; proof that the child is residing in the U.S. in the legal and physical custody of the U.S. citizen parent; I-551, Permanent Resident card; and I-551 with annotation of IR-3 or IR-4, if an adopted child.	Same	
	Hospital record of birth showing a U.S. place of birth	Same	
Third Level	Life, health, or other insurance record showing a U.S. place of birth	Same	
	Religious record of birth recorded in the U.S. or its territories within three months of birth, which indicates a U.S. place of birth showing either the date of birth or the individual's age at the time the record was made	Same	
	Early school record (preschool or daycare) showing a U.S. place of birth	Same	
Fourth Level	Federal or State census record showing U.S. citizenship or a U.S. place of birth.	Same	
	Vital Statistics Unit official notification of birth registration showing a U.S. place of birth	Removed	
	Institutional admission papers from a nursing facility, skilled care facility or other institution showing a U.S. place of birth	Same	
	Medical (clinic, doctor or hospital) record, excluding an immunization record, showing a U.S. place of birth	Same	
	Statement showing a U.S. place of birth signed by the physician or midwife who was in attendance at the time of birth	NEW: An affidavit signed by another individual, regardless of blood relationship to the individual,	

Form H1097, Affidavit for Citizenship/Identity, from two adults regardless of blood relationship to the individual. The individual may be a U.S. citizen by birth or naturalization. Use only as a last resort when other evidence is not available.

under penalty of perjury who can reasonably declare to the applicant's citizenship, and that contains the applicant's name, date of birth, and place of U.S. birth. The affidavit does not have to be notarized. Use only as a last resort when other evidence is not available.

Copies of the document used to verify citizenship must be legible and must not be questionable. Submit a copy of the document for imaging.

*Individuals born in Puerto Rico must provide a birth certificate issued on or after July 1, 2010, unless certified previously using a birth certificate issued before July 1, 2010.

Note: Staff should not re-verify citizenship after initial application.

Sources Used to Verify Identity Only

- One of the following is acceptable, provided such document has a photograph or other identifying information such as, but not limited to, name, age, sex, race, height, weight, eye color, or address:
 - driver's license issued by a state or territory;
 - school identification card, U.S. military card, or draft record;
 - identification card issued by a federal, state, or local government with the same information included on driver's licenses;
 - military dependent's identification card; or
 - U.S. Coast Guard Merchant Mariner card;
- Native American Tribal document;
- signed application for Medicaid (including the signature of an authorized representative acting on the individual's behalf)
 - this is applicable for all individuals on the application except the signee (no person may attest to their own identity);
- two or more corroborating documents (examples include but are not limited to marriage licenses, divorce decrees, or high school diplomas);
- for children under age 19, a clinic, doctor, hospital, or school record, including preschool or day care records; or
- Form H1097, Affidavit for Citizenship/Identity, signed by another individual, regardless of blood relationship to the individual, under penalty of perjury who can reasonably attest to the applicant's citizenship. The form must contain the applicant's name, date of birth, and place of U.S. birth. The affidavit does not have to be notarized. Use only as a last resort when other evidence is not available.

If using a document from this list, the individual must also provide an additional Medicaid citizenship verification document. Do not use the same document to verify identity that was used to verify citizenship and vice versa.

Automation

Automation changes will be implemented with Release 89 scheduled for December 2013.

4. Reasonable Opportunity Verification

Current Policy

Medicaid applicants or recipients who declare themselves to be U.S. citizens, have applied for an SSN but have not been issued one, and who do not provide verification of citizenship must be allowed a period of reasonable opportunity to provide verification of citizenship. Reasonable opportunity is defined as the period of time from the certification date until the next complete eligibility determination.

New Policy

Medicaid applicants or recipients who declare themselves to be U.S. citizens or have an eligible alien status, but for whom verification of citizenship or alien status is unavailable, must be allowed a period of reasonable opportunity to provide verification of citizenship or alien status.

Reasonable opportunity is now defined as the 95-day period from the date the notice is issued an individual is allowed to provide another source of citizenship or alien status verification.

Reasonable opportunity must now be allowed:

- For verification of citizenship *and* alien status
- For 95 days (for *all* affected programs)
- Anytime the individual has not provided verification of citizenship or alien status and staff is unable to verify citizenship or alien status using electronic databases

The reasonable opportunity period may be triggered under the following conditions:

- The individual is unable to provide an SSN needed to electronically verify citizenship with SSA.
- There is an inconsistency between the data available from an electronic source and the individual's declaration of citizenship or alien status.
- Electronic verification is unsuccessful, including agency efforts to resolve any inconsistencies, and additional verification is still needed.

At application, redetermination, and when adding a person, if the individual does not provide proof of citizenship or alien status and no other information is required to determine eligibility, certify the individual for Medicaid if all other eligibility requirements are met. TF0001, Notice of Case Action, informs the applicant that citizenship or alien status verification is required within 95 days and lists the names of each individual who must provide citizenship or alien status verification.

If additional information is required to determine eligibility, request the additional information and verification of citizenship or alien status. If citizenship or alien status verification is the only information that is not provided, do not delay certification or deny the application. The TF0001

informs the applicant that citizenship or alien status verification will be required within 95 days and lists the names of each individual who must provide citizenship or alien status verification.

The day the reasonable opportunity period expires (the 95th day), TIERS will generate an alert that will create a task. Deny or disqualify the individual if the individual has not provided citizenship verification.

The new reasonable opportunity period replaces the WTPY Citizenship Verification Resolution Period. Eligibility specialists should not allow a WTPY Citizenship Verification Resolution Period. Instead, the eligibility specialist should certify the case and allow a reasonable opportunity period for the client to verify citizenship or alien status.

Automation

TIERS will trigger an alert with a corresponding Task List Manager (TLM) task for all Medicaid and CHIP TOAs when the 95 days of reasonable opportunity is met for an individual. The alert will be set for the date the reasonable opportunity period expires (the 95th day). Deny or disqualify the individual if the individual has not provided citizenship verification.

Automation changes will be implemented with Release 89 scheduled for December 2013.

5. Authorized Representative

Current Policy

If an individual designates an authorized representative (AR) for their Medicaid benefits, the AR is designated at the case level and has access to the individual's other benefit information. Organizations are not currently designated as ARs. If the individual chooses to designate an AR, the individual must designate the AR on the signature page or appropriate section of Form H1200, Application for Assistance - Your Texas Benefits; H1200-A, Medical Assistance Only (MAO) Recertification; H1200-EZ, Application for Assistance - Aged and Disabled; H1200-MBI, Application for Benefits - Medicaid Buy-In; or H1200-MBIC, Application for Benefits - Medicaid Buy-In for Children (H1200 series), or complete Form H1003, Appointment of an Authorized Representative. The AR designation is effective from the date the AR signs the acknowledgement until the individual notifies the agency that the designation is no longer valid.

New Policy

An applicant/recipient can designate an individual or organization to act on his or her behalf. Designation of an AR must include the applicant's signature and must be accepted in person, online, via mail, or via fax.

The role of the AR has been expanded to include the following:

- Signing an application on the applicant's behalf
- Completing and submitting a renewal form
- Receiving copies of the applicant's/recipient's notices and other communications from the agency
- Acting on behalf of the applicant/recipient in all other matters with the agency

An individual may designate an AR to solely have access to his or her Medicaid benefit information. In this case, the AR would then be called a Medicaid Authorized Representative. If an individual designates an AR on any of the H1200 series applications, Appendix C of the Texas Streamlined Application, a Marketplace paper application, or through an account transfer, that AR is a Medicaid Authorized Representative. If an individual designates an AR through YourTexasBenefits.com (YTB), that AR is designated for all programs applied for through YTB (for example, Medicaid, the Children's Health Insurance Program (CHIP), the Supplemental Nutrition Assistance Program (SNAP), and the Temporary Assistance for Needy Families (TANF) program).

The power to act as an AR is valid until:

- The individual or AR notifies the agency that the representative is no longer authorized to act on the client's behalf, or
- There is a change in the legal authority upon which the individual or organization's authority was based.

Notices ending the designation of the AR must include the individual's or AR's signature as appropriate and must be accepted in person, online, via mail, or via fax.

Automation

MEPD staff will continue to enter the AR designation for MEPD applicants and recipients at the case level. For MBIC cases, staff will continue to enter the AR at case level and on the Alternate Payee page.

Because the AR page in TIERS is set up at the case level, it cannot be used for AR designations pertaining only to Medicaid. Effective January 1, 2014, Texas Works staff must use the Alternate Payee page to capture AR designations that only pertain to Medicaid and/or CHIP. Texas Works staff will capture AR in the Alternate Payee page in the following scenarios:

- The applicant or client indicates on Form H1010-M (the addendum to the Form H1010) that the AR they designate should only have access to Medicaid and/or CHIP benefit information.
- An applicant or client designates an AR in Appendix C of the Texas Streamlined Application.
- An applicant or client designates an AR in Appendix C of the Marketplace Single Streamlined Application.
- An AR is designated in an account transfer received from the Marketplace.

Automation changes will be implemented with Release 89 scheduled for December 2013.

Effective Date

Changes to policy are effective January 1, 2014.

Handbook

Staff will be informed when the MEPD Handbook is updated.

Training

For MEPD staff, AR training will be presented as part of the web-based training course titled Overview of Changes for Non-MAGI programs.